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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

STRAT PAC

ADDRESS (number and street) 88 E BROAD ST. #1320

Check if different than previously reported. (ACC)

COLUMBUS OH 43215

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00382416

3. IS THIS REPORT NEW OR AMENDED (N) OR (A)

X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)

(b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on in the State of

(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on 11 02 2010 in the State of OH

5. Covering Period 10 14 2010 through 11 22 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer NATALIE BAUR

Signature of Treasurer [Handwritten Signature] Date 12 02 2010

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only table with 8 columns and 1 row. FEC FORM 3X Rev. 12/2004

10030504137

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**STRAT PAC**

Report Covering the Period: From:

10 14 2010

To:

11 22 2010

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, 2010	258,690
(b) Cash on Hand at Beginning of Reporting Period.....	7,137.46
(c) Total Receipts (from Line 19).....	6,773.40
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	25,073.96
7. Total Disbursements (from Line 31).....	13,910.86
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	27,660.86
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	24,000.00
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	3,660.86

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

10030504138

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**STRAT PAE**

Report Covering the Period: From: <sup>N M D Y Y Y</sup> 10 14 2010 To: <sup>N M D Y Y Y</sup> 11 22 2010

**I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

4,773.40

23,073.96

(ii) Unitemized.....

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

4,773.40

23,073.96

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

2,000.00

2,000.00

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

6,773.40

25,073.96

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

6,773.40

25,073.96

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

6,773.40

25,073.96

10030504139

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures .....		100.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		100.00
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10,250.00	24,000.00
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements .....		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	10,250.00	24,000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10,250.00	24,000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

**III. Net Contributions/Operating Expenditures**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	6,773.40	25,073.96
34. Total Contribution Refunds (from Line 28(d)) .....	—	—
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6,773.40	25,073.96
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	—	100.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	—	—
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	—	100.00

10030504141

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE OF

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**STRAT PAC**

**A.** Full Name (Last, First, Middle Initial) **KLINGER, DARRIN**

Mailing Address **1053 Cheliway Ct.**

City **Powell, OH** State **OH** Zip Code **43068**

Date of Receipt **10 31 2010**

FEC ID number of contributing federal political committee. **C**

Amount of Each Receipt this Period **416.68**

Name of Employer **Strategic Public Partners** Occupation **Consultant**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date **3333.44**

**B.** Full Name (Last, First, Middle Initial) **Erb, Joseph**

Mailing Address **3293 Scioto Farms Dr.**

City **Hilliard OH** State **OH** Zip Code **43026**

Date of Receipt **10 31 2010**

FEC ID number of contributing federal political committee. **C**

Amount of Each Receipt this Period **416.68**

Name of Employer **Strategic Public Partners** Occupation **Consultant**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date **3333.44**

**C.** Full Name (Last, First, Middle Initial) **Lynaugh, Brandon**

Mailing Address **1299 Avondale Ave.**

City **Grandview Heights, OH** State **OH** Zip Code **43212**

Date of Receipt **10 31 2010**

FEC ID number of contributing federal political committee. **C**

Amount of Each Receipt this Period **416.68**

Name of Employer **Strategic Public Partners** Occupation **Consultant**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date **3333.44**

**SUBTOTAL** of Receipts This Page (optional)..... **1,250.04**

**TOTAL** This Period (last page this line number only).....

10030504142

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE	OF
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STRAT PAC**

**A.** Full Name (Last, First, Middle Initial)  
**Hammond, Matt**

Mailing Address  
**150 Woodduck Ct.**

City  
**Columbus** State  
**OH** Zip Code  
**43215**

FEC ID number of contributing federal political committee.  
**C**

Name of Employer  
**Strategic Public Partners** Occupation  
**Consultant**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**3333.44**

Date of Receipt  
**10 / 31 / 2010**

Amount of Each Receipt this Period  
**4,166.8**

**B.** Full Name (Last, First, Middle Initial)  
**Weisenbach, Phillip**

Mailing Address  
**7041 Timberview Dr.**

City  
**Dublin** State  
**OH** Zip Code  
**43017**

FEC ID number of contributing federal political committee.  
**C**

Name of Employer  
**E.W.I.** Occupation  
**Manager**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**200.00**

Date of Receipt  
**10 / 19 / 2010**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**HDR INC. PAC**

Mailing Address  
**8404 Indian Hills Dr.**

City  
**Omaha** State  
**NE** Zip Code  
**68114**

FEC ID number of contributing federal political committee.  
**C**

Name of Employer  
**HDR INC. PAC** Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**200000**

Date of Receipt  
**10 / 29 / 2010**

Amount of Each Receipt this Period  
**200000**

**SUBTOTAL** of Receipts This Page (optional).....▶

**TOTAL** This Period (last page this line number only).....▶

**26,166.8**

10030504143

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE	OF
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STRAT PAC**

**A.** Full Name (Last, First, Middle Initial)  
**HAMMOND, MATT**

Mailing Address  
**650 Woodduck Ct.**

City  
**Columbus** State **OH** Zip Code **43215**

FEC ID number of contributing federal political committee.  
**C**

Name of Employer  
**Strategic Public Partners** Occupation **Consultant**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**333344**

Date of Receipt  
**10 ' 31 ' 2010**

Amount of Each Receipt this Period  
**41668**

**B.** Full Name (Last, First, Middle Initial)  
**Weisenbach, Philip**

Mailing Address  
**7041 Timberview Dr.**

City  
**Dublin** State **OH** Zip Code **43017**

FEC ID number of contributing federal political committee.  
**C**

Name of Employer  
**Edison Welding Inst.** Occupation **Manager**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**200.00**

Date of Receipt  
**10 ' 19 ' 2010**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**Cialone, Henry**

Mailing Address  
**4606 Burbank Dr.**

City  
**Columbus** State **OH** Zip Code **43220**

FEC ID number of contributing federal political committee.  
**C**

Name of Employer  
**Edison Welding Inst** Occupation **Manager**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**750.00**

Date of Receipt  
**10 ' 28 ' 2010**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional).....▶ **816668**

**TOTAL** This Period (last page this line number only).....▶ **473340**

10030504144

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE	OF
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full) **STRAT PAC**

**A.** Full Name (Last, First, Middle Initial) **HOR INC PAC**

Mailing Address **8404 Indian Hills Dr.**

City **Omaha** State **NE** Zip Code **68114**

FEC ID number of contributing federal political committee. **C00103903**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200000**

Date of Receipt **10 / 29 / 2010**

Amount of Each Receipt this Period **2,000.00**

**B.** Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

FEC ID number of contributing federal political committee. **C**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ \_\_\_\_\_

Date of Receipt \_\_\_\_\_

Amount of Each Receipt this Period \_\_\_\_\_

**C.** Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

FEC ID number of contributing federal political committee. **C**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ \_\_\_\_\_

Date of Receipt \_\_\_\_\_

Amount of Each Receipt this Period \_\_\_\_\_

**SUBTOTAL** of Receipts This Page (optional).....▶ **200000**

**TOTAL** This Period (last page this line number only).....▶ **200000**

10030504145

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			PAGE OF	
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29
					<input type="checkbox"/> 26
					<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**STRAT PAC**

**A.** Full Name (Last, First, Middle Initial)  
**Jim Jordan For Congress**

Mailing Address  
**100 20 2010**

City State Zip Code

Purpose of Disbursement  
**CONTRIBUTION**

Candidate Name  
**Jim Jordan**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: **OH** District:

Date of Disbursement  
**10 20 2010**

Amount of Each Disbursement this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Jim Renacci For Congress**

Mailing Address  
**150 Smokerise Dr.**

City State Zip Code  
**Wadsworth OH 44281**

Purpose of Disbursement  
**CONTRIBUTION**

Candidate Name  
**Jim Renacci**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: **OH** District: **16**

Date of Disbursement  
**10 20 2010**

Amount of Each Disbursement this Period  
**1,000.00**

**C.** Full Name (Last, First, Middle Initial)  
**REPUBLICAN SENATE CAMPAIGN COMTE.**

Mailing Address  
**211 S. Fifth Street**

City State Zip Code  
**Columbus OH 43215**

Purpose of Disbursement  
**CONTRIBUTION TO COMMITTEE**

Candidate Name  
**N/A**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
**10 26 2010**

Amount of Each Disbursement this Period  
**1,000.00**

**SUBTOTAL** of Disbursements This Page (optional)..... **2,500.00**

**TOTAL** This Period (last page this line number only).....

10030504146

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE OF

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**STRAT PAC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

**A.**

Full Name (Last, First, Middle Initial): HUSTED FOR OHIO

Mailing Address: 148 Sherbrooke Dr.

City: Kettering State: OH Zip Code: 45429

Purpose of Disbursement: CONTRIBUTION to STATE CAND.

Candidate Name: JON HUSTED

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: OH District: \_\_\_\_\_

Amount of Each Disbursement this Period: 1,000.00

Category/Type: \_\_\_\_\_

**B.**

Full Name (Last, First, Middle Initial): OHIO HOUSE REPUBLICAN OP. COMTE.

Mailing Address: 211 S. Fifth St.

City: Columbus State: OH Zip Code: 43215

Purpose of Disbursement: CONTRIBUTION TO COMMITTEE

Candidate Name: n/a

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 10/20/2010

Amount of Each Disbursement this Period: 1,000.00

Category/Type: \_\_\_\_\_

**C.**

Full Name (Last, First, Middle Initial): KASICH FOR OHIO

Mailing Address: 340 E. GAY ST.

City: COLUMBUS, State: OH Zip Code: 43215

Purpose of Disbursement: CONTRIBUTION TO STATE CAND.

Candidate Name: JOHN KASICH

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 10/20/2010

Amount of Each Disbursement this Period: 1,000.00

Category/Type: \_\_\_\_\_

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3000.00

10030504147

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE OF

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

STRAT PAC

Full Name (Last, First, Middle Initial)

A. KASICH FOR OHIO

Date of Disbursement

10 / 29 / 2010

Mailing Address

340 E. GAY ST.

City

COLUMBUS OH 43215

Purpose of Disbursement

CONTRIBUTION

Candidate Name

JOHN KASICH

Category/  
Type

Amount of Each Disbursement this Period

1,000.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: OH

District:

Full Name (Last, First, Middle Initial)

B. CHABOT FOR CONGRESS

Date of Disbursement

10 / 29 / 2010

Mailing Address

3339 HARRISON AVE.

City

CINCINNATI OH 45211

Purpose of Disbursement

CONTRIBUTION

Candidate Name

STEVE CHABOT

Category/  
Type

Amount of Each Disbursement this Period

500.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: OH

District: 2

Full Name (Last, First, Middle Initial)

C. BOEHNER FOR SPEAKER

Date of Disbursement

10 / 29 / 2010

Mailing Address

631-B Pennsylvania Ave SE

City

Washington DC 20003

Purpose of Disbursement

CONTRIBUTION

Candidate Name

JOHN BOEHNER

Category/  
Type

Amount of Each Disbursement this Period

1,000.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

2,500.00

TOTAL This Period (last page this line number only).....▶

10030504148

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE OF

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**STRAT PAC**

Full Name (Last, First, Middle Initial)

A. <b>DEWINE FOR OHIO</b>		Date of Disbursement
Mailing Address <b>2587 Conkey Rd.</b>		<b>10' 29' 2010</b>
City <b>Cedarville</b> State <b>OH</b> Zip Code <b>45314</b>	Purpose of Disbursement <b>CONTRIBUTION TO STATE CAND</b>	Amount of Each Disbursement this Period
Candidate Name <b>MIKE DEWINE</b>	Category/Type	<b>1,000.00</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	
State: District:		

B. <b>OHIO COLLEGE REPUBLICAN FEDERATION</b>		Date of Disbursement
Mailing Address <b>211 S. Fifth St.</b>		<b>10' 29' 2010</b>
City <b>Columbus</b> State <b>OH</b> Zip Code <b>43215</b>	Purpose of Disbursement <b>CONTRIBUTION</b>	Amount of Each Disbursement this Period
Candidate Name <b>N/A</b>	Category/Type	<b>250.00</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	
State: District:		

C. <b>LA TOURETTE FOR CONGRESS</b>		Date of Disbursement
Mailing Address <b>320 Kenarden Dr.</b>		<b>10' 29' 2010</b>
City <b>Highland Hts,</b> State <b>OH</b> Zip Code <b>44143</b>	Purpose of Disbursement <b>CONTRIBUTION</b>	Amount of Each Disbursement this Period
Candidate Name <b>STEVE LA TOURETTE</b>	Category/Type	<b>500.00</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	
State: <b>OH</b> District: <b>14</b>		

SUBTOTAL of Disbursements This Page (optional).....▶

**1,750.00**

TOTAL This Period (last page this line number only).....▶

10030504149

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE OF

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**STRAT PAC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

**A. CITIZENS FOR TURNER**

MM / DD / YYYY  
11 / 01 / 2010

Mailing Address  
**120 W. Second St. #1510**

City State Zip Code  
**Dayton OH 45402**

Purpose of Disbursement  
**CONTRIBUTION**

Amount of Each Disbursement this Period

Candidate Name  
**MIKE TURNER**

Category/  
Type

500.00

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: **OH** District: **03**

Full Name (Last, First, Middle Initial)

Date of Disbursement

**B.**  
Mailing Address

MM / DD / YYYY

City State Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

**C.**  
Mailing Address

MM / DD / YYYY

City State Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶

50000

TOTAL This Period (last page this line number only).....▶

1025000

10030504150

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *f3d & EEP* Shipping Date  
*12/2/10*  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*Am D*  
 PREPARER

*12/2/10*  
 DATE PREPARED

10030504151